| PATENT APPLICATION FEE DETERMINATION REC<br>Effective December 8, 2004   |  |   |   |                                   |            |                                |            | ORD        | Application or Docket Number |            |                     |                        |
|--|--|---|---|-----------------------------------|------------|--------------------------------|------------|------------|------------------------------|------------|---------------------|------------------------|
|  |  | CLAIMS                                    | AS FILED - PART I  (Column 1) (Column 2)                          |                                   |            |                                |            | SMALL EN   | mry                          | OR         | OTHER<br>SMALL      |                        |
| U.S. NATIONAL STAGE FEES   |  |   |   |                                   |            | •                              |            | RATE       | FEE                          | ] .        | RATE                | FEE                    |
| BASIC FEE  |  |   | SMALL ENT. = \$ 150   |                                   | LAR        | 3E ENT. = \$ 300               |            | BASIC FEE  |                              | OR         | BASIC FEE           | 300                    |
| EXAMINATION FEE  |  |   | Satisfies PCT Article 33(1)-<br>(4) = \$50 / \$ 100               |                                   |            | her situations = 100 / \$ 200  |            | EXAM. FEE  |                              | 1          | EXAM. FEE           | 200                    |
| SEARCH FEE   |  |   | U.S. is ISA = \$50 / \$100<br>ALL other countries = \$200 / \$400 |                                   |            | ther situations = 250 / \$ 500 |            | SEARCH FEE | <u> </u>                     |            | SEARCH FEE          | 4-80                   |
| FEE FOR EXTRA SPEC. PGS.   |  |   | minus 100 =   |                                   |            | / 50 =                         |            | X \$ 125 = |                              |            | X \$ 250 =          |                        |
| TOTAL CHARGEABLE CLAIMS  |  |   | // minu   | ıs 20 =                           | •          |                                |            | X \$ 25 =  |                              | OR         | X \$ 50 =           |                        |
| INDEPENDENT CLAIMS   |  |   | 3 minus 3 =   |                                   |            |                                |            | X \$ 100 = |                              | OR         | X \$ 200 =          |                        |
| MUL  | TIPLE DEPEN  | DENT CLAIM PRE                            | ESENT   |                                   |            |                                | + \$ 180 = |            | OR                           | + \$ 360 = |                     |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |   |                                   |            |                                |            | TOTAL      |                              | OR         | TOTAL               | $\infty$ P             |
|  | CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST REMAINING NUMBER PRESENT |   |   |                                   |            |                                | [          | SMALL E    | ADDI-<br>TIONAL              | OR         | OTHER<br>SMALL E    | ADDI-                  |
| AMENDMENT A  |  | AFTER<br>AMENDMENT                        | ·   | PREVIOUSLY<br>PAID FOR            |            | EXTRA                          | 11         | MIE        | FEE                          |            | RATE                | TIONAL<br>FEE          |
|  | Total  | • 11                                      | Minus *   | <u>ac</u>                         |            | =                              |            | X \$ 25 =  |                              | OR         | X \$ 50 =           | ,                      |
|  | Independent  | • з                                       | Minus *   | Ainus *** =                       |            | =                              |            | X \$ 100 = |                              | OR         | X \$ 200 =          | .:                     |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |   |   |                                   |            | L                              | + \$ 180 = |            | OR                           | + \$ 360 = |                     |                        |
|  | . ,  |   |   |                                   |            |                                |            | FFF        | ,                            | OR         | FFF                 |                        |
| 6-14-06 (Column 1) (Column 2) (Column 3)   |  |   |   |                                   |            |                                |            |            |                              |            |                     |                        |
| AMENDMENT 8  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | HIGHE<br>NUME<br>PREVIO<br>PAID F | ER<br>USLY | PRESENT<br>EXTRA               |            | RATE       | ADDI-<br>TIONAL<br>FEE       |            | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total *  | • 11                                      | Minus *   | O                                 | <b>O</b>   | . —                            |            | X \$ 25 =  |                              | OR         | X \$ 50 =           |                        |
|  | Independent  | · 3                                       | Minus .   | ** =                              | 3          | ·                              |            | X \$ 100 = |                              | OR         | X \$ 200 =          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |   |                                   |            |                                |            | + \$ 180 = |                              | OR         | + \$ 360 =          |                        |
|  |  |   |   |                                   |            |                                |            | FFF        |                              | OR         | TOTAL ADDIT.<br>FFF |                        |
|  |  |   |   |                                   |            |                                |            |            |                              |            |                     |                        |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1. |  |   |   |                                   |            |                                |            |            |                              |            |                     |                        |